

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 6 October 2025
Title:	Healthcare Governance Committee meeting on 5 September 2025 – Chair's report to NHS Board
Responsible Director:	Ms Jennifer Wilson, Nurse Director
Report Author:	Ms Linda Semple, Non-Executive Director Mrs Angela O'Mahony, Committee Secretary

1. Purpose

This is presented to the Board for: Discussion.

This paper relates to: Local policy to ensure good governance practice in reporting from board committees

This aligns to the NHS Scotland quality ambitions of Safe, Effective and Person Centred. Good governance practice supports the effective delivery of services across the organisation.

2. Report summary

2.1 Situation

This report provides information to Board Members on key items discussed within the Governance Committee's remit, in order to provide assurance to the Board that those matters have been identified and are being addressed, where required.

2.2 Background

The Board Model Standing Orders advises that Board meeting papers will include the minutes of committee meetings which the relevant committee has approved. To ensure that there is no delay in reporting from committees this paper provides a timely update on key items from committees.

2.3 Assessment

Key items agreed by Committee are noted below. Identification of organisational risks, stakeholder considerations and other impacts were included in papers to the Committee.

- **Annual Reports** – Committee members received a suite of annual assurance reports, including a number of Public Health screening reports. In line with the

approach adopted last year, PowerPoint presentations were provided alongside annual reports to highlight key messages, successes, challenges and next steps. Committee members welcomed the detail within the report. The presentations are available on the Committee's MS Teams meeting site and all Board Members are encouraged to read these.

- **Healthcare Governance Strategic Risk Register** - Committee members discussed and scrutinised the risk register. There were two risks reviewed during the reporting cycle, with no changes to risk grading. Members requested that an update on the risk ID 921 related to the refurbishment of Ward 3A, University Hospital Crosshouse, be included in the action log for the next Committee meeting on 3 November 2025. There were no risks proposed for escalation or termination.
- **Digital patient communication** - Committee members received a short presentation on local progress with this work, in the context of improving healthcare quality and safety. Members agreed that a report be provided to Committee at a later date on the digital work programme specifically related to clinical safety.
- Members acknowledged the whole system improvement work taking place and future plans to triangulate adverse event, quality and safety and feedback and complaints activity in Governance Committee reporting. Members requested that an update on this work be provided at a future meeting.

2.4 Recommendation

The Board is asked to be aware of and discuss the key items highlighted and receive assurance that items are being addressed, where required.